

TCHP – PREVENTIVE SERVICES

Overview

Routine services which do not require a diagnosis or treatment are often referred to as preventive services. There are limitations on the frequency and coverage for some preventive services.

Unless otherwise noted, preventive services are **not** subject to the plan year deductible. Claims which indicate a diagnosis are not considered preventive and are subject to the plan year deductible.

Only the preventive services listed below are covered under TCHP.

Covered Benefits –

- **Colorectal Cancer Screening:**

- 80% of U&C for sigmoidoscopy once every 3 years for persons who are at least 50 years old.
- 80% of U&C for sigmoidoscopy once every 3 years for persons who are at least 30 years old and have a family history of colorectal cancer.
- 100% of U&C for fecal occult blood testing once every 3 years for persons who are at least 50 years old or for persons at least 30 years old who have a family history of colorectal cancer.
- 80% of U&C for professional charges associated with the interpretation of the screening.

- **Mammography:**

- 100% of U&C for one baseline mammogram for women age 30-39.
- 100% of U&C for one mammogram per plan year for women age 40 and over.
- 80% of U&C for professional charges associated with the interpretation of the test.

- **Pap/Cervical Smears:**

- 100% of U&C for pap/cervical smear once per plan year.
- 80% of U&C for office visit.
- 80% of U&C for professional charges associated with the interpretation of the test.

- **Prostate Screening:**

- 100% of U&C for prostate-specific antigen test for men age 40 and over once per plan year.
- 80% of U&C for office visit for prostate exam.
- 80% of U&C for professional charges associated with the interpretation of the screening.